

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/599,983
	Filing Date	April 3, 2007
	First Named Inventor	Roland REINER
	Title	INJECTABLE CROSSLINKED AND UNCROSSLINKED
	Art Unit	1623
	Examiner Name	G. Krishnan
	Attorney Docket Number	067802-5008

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

09629

OR

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☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE OF Applicant or Assignee of Record

Signature	<i>[Signature]</i>	Date	10-1-2008
Name	D. PETER GEIGLE	Telephone	409 602 8918/16
Title and Company	C.E.O.	Cell/Med AG	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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